

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		49	
O.I.P.E. CLASSIFIER		714369	12/5/00
FORMALITY REVIEW			02/15/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N .....	Non-elected
=	Allowed	I .....	Interference
-	(Through numeral)... Canceled	A .....	Appeal
÷	Restricted	O .....	Objected

Claim	Date
Final	Original
1	2/19/04
2 ✓	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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